

AO 440 (Rev. 8/01) Summons in a Civil Action

UNITED STATES DISTRICT COURT

District of Delaware

Guangming Liu
Jianghua Ma

SUMMONS IN A CIVIL CASE

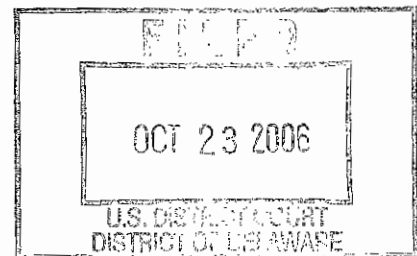
V.

CASE NUMBER: 06-508

Michael Chertoff, Secretary of the Department of Homeland Security
Emilio Gonzalez, Director of U. S. Citizenship and Immigration Services
Paul Novak, Director of Vermont Service Center, USCIS
Robert S. Muller, Director of Federal Bureau of Investigation
Alberto Gonzales, Attorney General of the U. S. Department of Justice
Colm F. Connolly, United States Attorney for the District of Delaware

TO: (Name and address of Defendant)

Paul Novak, Director
Vermont Service Center
U. S. Citizenship and Immigration Services
75 Lower Welden Street
St. Albans, VT 05479-0001



YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Guangming Liu
897 Marrows Road, APT G-6
Newark, DE 19713
Tel. 302-831-2124 (office), 302-266-0453 (home)

an answer to the complaint which is served on you with this summons, within 60 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

PETER T. DALLEO

CLERK

DATE

OCT 23 2006

(By) DEPUTY CLERK

Eustice W. White

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<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>Paul Novak, Director Vermont Service Center U.S. Citizenship & Immigration Service 75 Lower Welden Street St. Albans, VT 05479-0001</p>		<p>B. Received by (Printed Name) C. Date of Delivery</p> <p>ALBANS, VT 05479-0001 SEP 25 PM 128 RECEIVED DIRECTOR</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

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Sent To **Paul Novak, Director of VSC, WPS**
 Street, Apt. No., or PO Box No. **75 Lower Welden Street**
 City, State, ZIP+4 **St. Albans, VT 05479-0001**

PS Form 3800, June 2002 See back for instructions

NEWARK DE FEDERAL STA SEP 22 2006 11661 SPS

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